AMENDMENTS TO THE CLAIMS:

This listing of claims will replace all prior versions, and listings, of claims in the application:

1 (original). A conjugate with recombinant cholera toxin B sub-unit (rCTB) of a peptide or polypeptide consisting of or containing a sequence corresponding to amino acid residues 336-351 of the human heat shock protein HSP 60, or the corresponding residues of the microbial 65kD heat shock protein, or one which differs from either of these by up to and including 4 amino acid alterations (sub-situation and/or deletion and/or insertion) and having similar tolerising properties for Behcet's disease, or related types of uveitis, by oral, nasal, transmucosal or parenteral administration, or one which is extended from any one of the above-mentioned residues at the N-terminus or C-terminus or both with one or more non-wild-type amino acid sequences.

2 (original). A conjugate according to claim 1, having an added N-terminal cysteine residue and a C-terminal acetate group.

3 (currently amended). A conjugate according to claim 1 ~~or 2~~, prepared with the use of N-succinimydyl 3-(2-pyridyl)-dithio) propionate as cross linking agent.

4 (original). A conjugate according to claim 3, containing 4 or *5* peptide residues per mol of rCTB pentamer.

5 (currently amended). A pharmaceutical composition comprising the conjugate of ~~any of claims 1 to 4~~claim 1, in a pharmaceutically acceptable carrier.

6 (original). A composition according to claim 5, which is formulated for oral or nasal or transmucosal administration, or for subcutaneous or intradermal administration.

7 (currently amended). A method of treatment or prevention of Behcet's disease or related types of uveitis in patients which comprises administration of an effective amount of the conjugate or composition of ~~any of claims 1 to 4~~claim 1.

8 (original). A method according to claim 7, in which a dosage of from 0.1 to 20 mg of the conjugate is administered per single dose.

9 (original). A method according to claim 8 in which the dose of the conjugate is in the range of from 0.1 to 5.0 mg.

10 (currently amended). A method according to claim 7, ~~8, or 9,~~ in which administration is commenced after the patient has been free of disease activity for at least 2 and preferably 3-6 months before tolerisation is commenced.

11 (original). A method according to claim 10, in which the patient has had adequate suppression of disease for up to 6 months by immunosuppressive or other treatment before tolerisation is commenced.